| OFFICE USE ONLY |
|-----------------|
| ISSUED: |

| WSDA |
|--|
| Washington State Department of Agriculture |
| Pesticide Management Division |
| PO Box 42591 • Olympia, WA 98504-2591 |
| Toll free 877-301-4555 |
| E-Mail: license@agr.wa.gov |

| | 7101 |
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| CASHIER USE ONLY | |
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SUPPLEMENTAL COMMERCIAL APPLICATOR PESTICIDE LICENSE APPLICATION

| Instructions: Use this form to Complete all of Section A. On areas. | | | | | | | |
|---|---|--|--|---------------------------------------|---------------------------------|-------------------|------------|
| A) COMPANY INFORMAT | ION | | | | | | |
| APPLICATOR NAME (Last, First, Middle) PL | | | DATE OF BIRTH | SOCIAL SEC (Required) | CURITY NUMBER | HOME TELPHONE NO. | |
| APPLICATOR HOME ADDRESS (City, State, | Zip) | | | | | COUNTY | |
| COMPANY NAME (Including DBA - List Additional DBA's on reverse side) UBI NO. | | | | | COMPANY TEL. NO. | | |
| COMPLETE COMPANY STREET ADDRESS (Physical site where business operates) | | | | | | COUNTY | |
| COMPANY MAILING ADDRESS (City, State, | Zip) | | | | | COUNTY | |
| SIGNATURE | | | | DATE | | LICENSE NUMBER | |
| □ Additional business loca □ Additional dba (doing bu □ A change of Washington □ Additional business veh □ Replacement for lost pla □ The use of issued plates □ Equipment (Section B—Gro □ Initial equipment registra □ Additional equipment reg | usiness as) names to based legal age ticle ID stickers (S ate(s) that have be son different equi bund/Section C—/ ation for the current gistration for the c | s (Section G). N nt (Section H). N Section D). No fe een issued for cu pment (Section I Air): nt year. First app | o fee. No fee. e. urrent year (SB—Ground o | ection B- r Section fee require | –Ground or Se C—Air). No fee | |) . |
| EQUIPMENT: | No. 1 | No. 2 | | No. 3 | No. 4 | No. 5 | |
| Make of Apparatus | | | | | | | |
| Number and Size Of Tanks | | | | | | | |
| WSDA Plate Number | | | | | | | |
| C) AERIAL EQUIPMENT: | FAA AG. CERTIFICATE NO | | | | | | |
| 'N' Number of Aircraft | N | N | N | | N | N | |
| Make and Color | | | | | | | |
| Helicopter (H) or Plane (P) | | | | | | | |
| WSDA License Plate No. | | | | | | | |
| D) BUSINESS VEHICLES | | | | | | | |
| COMMERCIAL APP | LICATOR MOTO | R VEHICLE IDEI | NTIFICATION | STICKE | R - Reference | WAC 16-228-213(2) | |
| All motor vehicles involve license plate must have a | WSDA Commerc | ial Applicator sti | | | | | atus |
| NUMBER OF WIND | ONIELD STICKE | LUS INCEDED: _ | | | | | |

| NAME | Please print clearly LICENSEE | | EMPLOYMENT STATUS | | | |
|--------------------------------|--------------------------------|----------------|-----------------------|--|--|--|
| (Last, First, Middle) | NUMBER | DATE NEW | DATE NO LONGER EMPLOY | | | |
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| BUSINESS LOCATIONS FOR WHICH T | HIS LICENSE APPLIES | | | | | |
| . Name: | Bus. Name: | | | | | |
| | | ess: | | | | |
| | | State, Zip: | | | | |
| phone: () | Telephone: | Telephone: () | | | | |
| inty: | County: | County: | | | | |
| . Name: | | | | | | |
| | | _ | | | | |
| et Address: | | | | | | |
| s, State, Zip: | | | | | | |
| | | () | | | | |
| | | | | | | |
| ADDITIONAL DBA's | | | | | | |
| | | | | | | |
| | | | | | | |
| CHANGE OF LEGAL AGENT | | | | | | |